

multiple dependent claim
fee calculation sheet
(use uss form pto-576)

Serial No.
10-618-468

Printed

Applicant

CLAIMS	AS FILED		ADDED BY AMENDMENT		ADDED BY AMENDMENT		10	10
	IND.	IND.	IND.	IND.	IND.	IND.		
1	1						51	
2							52	
3							53	
4							54	
5							55	
6							56	
7							57	
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9							59	
10							60	
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39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.							TOTAL IND.	
TOTAL IND.							TOTAL IND.	
TOTAL IND.							TOTAL IND.	